



FEE TRANSMITTAL
for FY 2005
(Large Entity)

		Complete if Known	
		Application Number	09/973,089
		Filing Date	10 October 2001
		First Named Inventor	Connett-Porceddu
		Examiner Name	Stuart F. Baum
		Group Art Unit	1638
<input type="checkbox"/> Applicant claims small entity status		Attorney Docket Number	2411-111
Total Amount of Payment	(\$910)	Confirmation Number	4802

METHOD OF PAYMENT (check one)

- The Commissioner is hereby authorized to charge the fees indicated below or credit overpayment to Deposit Account Number 02-2135 in the name of Rothwell, Figg, Ernst & Manbeck
- Charge any additional fee required under 37 CFR 1.16 and 1.17 to Deposit Account No. 02-2135.
- Payment by check enclosed

FEES CALCULATION

1. FILING, SEARCH AND EXAMINATION FEES

Code	Fee	Fee Description	Fee Paid
1001	300	Utility Filing Fee	[]
	790	filed before Dec. 8, 2004	[]
1111	500	Utility Search Fee	[]
1311	200	Utility Examination Fee	[]
1002	200	Design Filing Fee	[]
	350	filed before Dec. 8, 2004	[]
1112	100	Design Search Fee	[]
1312	130	Design Examination Fee	[]
1003	200	Plant Filing Fee	[]
	550	filed before Dec. 8, 2004	[]
1113	300	Plant Search Fee	[]
1313	160	Plant Examination Fee	[]
1004	300	Reissue Filing Fee	[]
	790	filed before Dec. 8, 2004	[]
1114	500	Reissue Search Filing Fee	[]
1314	600	Reissue Examination Fee	[]
1005	200	Provisional Filing Fee	[]

SUBTOTAL \$

2. CLAIMS

	Extra Claims	Fee	Fee Paid
Total Claims	[] - 20* = [] x	\$50 = []	
Independent Claims	[] - 3* = [] x	200 = []	
Multiple Dependent Claims	+ []	360 = []	

*or number previously paid, if greater

SUBTOTAL \$

SUBTOTAL \$910

3. APPLICATION SIZE FEE

Total Sheets [] - 100 = []/50 = []** x \$250 =

** Number of each additional 50 or fraction thereof

SUBTOTAL \$

SUBMITTED BY		Complete (if applicable)		
NAME AND REG. NUMBER	Jeffrey L. Ihnen, Reg. No. 28,957			
SIGNATURE		DATE	1 April 2005	DEPOSIT ACCOUNT USER ID 02-2135
				xxx



TRANSMITTAL FORM

(be used for all correspondence after initial filing)

Complete if Known	
Application Number	09/973,089
Filing Date	October 10, 2001
First Named Inventor	Marie B. Connell-Porceddu
Examiner Name	Stuart F. Baum
Group Art Unit	1638
Total Number of Pages in This Submission	Attorney Docket Number 2411-111

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Request for Continued Examination (RCE)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

REMARKS:

SUBMITTED BY		Complete (if applicable)		
NAME AND REG. NUMBER	Jeffrey L. Ihnen, Reg. No. 28,957			
SIGNATURE		DATE	1 April 2005	DEPOSIT ACCOUNT USER ID 02-2135
				xxx